

Nebraska Tobacco Quitline – Order Form



Complete this form and send to **one** of the following:

- Email: dhhs.tfn@nebraska.gov
- Fax: 402-471-6446

PLEASE PRINT CLEARLY OR TYPE: Date: _____

Name of Organization: _____

Name of Person Requesting Materials: _____

Mailing Address: _____

City: _____, NE Zip: _____

Telephone: _____ Email: _____

How will you use the materials (ex. patient education, health fair, etc.)? _____

Maximum request amount is 50 unless limit is specified.

<i>Quantity</i>	<i>Quantity</i>	<i>Quantity</i>
Diabetes and Tobacco Brochure (New)	___ English	___ Spanish
Quitting Chew Brochure (New)	___ English	___ Spanish
Quitting Chew Checklist (New)*	___ English	___ Spanish
Nebraska Cessation Resources Fact Sheet*	___ English	___ Spanish
Nebraska Tobacco Quitline Magnet (Limit 25)	___ English	___ Spanish
Nebraska Tobacco Quitline Business Card (Limit 25)	___ English	___ Spanish
Nebraska Tobacco Quitline What to Expect Patient Brochure	___ English	___ Spanish
After You Quit Smoking Card	___ English	___ Spanish
Smoking and Chronic Disease	___ English	___ Spanish
Pens (Limit 25)	___ English	___ Spanish
Smoke-Free Home Window Cling (Limit 25)	___ English	___ Spanish
Smoke-Free Car Window Cling (Limit 25)	___ English	___ Spanish
Wrist Bands (Limit 25)	___ English	___ Spanish
You Can Quit Smoking Primary Care Tear Sheet		___ Spanish only
Nebraska Tobacco Quitline Healthcare Provider Fax Referral Program*	___ English only	
1-800-QUIT-NOW Plastic Cards (Limit 25)	___ English only	
Tobacco Cessation What You Need to Know (Limit 25)	___ English only	
Smoking & Tobacco Pocket Slider (Limit 25)	___ English only	

Please allow 7-10 business days for delivery. All materials while supplies last.

Questions? Email: dhhs.tfn@nebraska.gov For more information: www.QuitNow.ne.gov

* Materials available online at QuitNow.ne.gov to print as needed

Requests are only filled for Nebraska residents, businesses or organizations.